FORM D

# SECURITII

UNITED STATES	OMB API	PROVAL
ES AND EXCHANGE COMMISSION Washington, D.C. 20549	OMB Number: Expires: Estimated averag per response	3235-0076 April 30, 2008 e burden hours 16.00

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

·	SEC USE ONLY	····································
Prefix		Serial
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	DATE RECEIVE	D <sub>1</sub>
		]

16.00

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E2M Value Added Fund II (Fund C), LP private offering of Limited Partnership Interests	•
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506  Type of Filing: Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	SEC Mail Processing
Enter the information requested about the issuer	Section
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) E2M Value Added Fund II (Fund C), LP	1111 N 17NNR
Address of Executive Offices (Number and Street, City, State, Zip Code) 3401 Armstrong Avenue, Dallas, TX 75205	Telephone Numbri (Leanne Marca Code) (214) 443-1987 <b>111</b>
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Equity investments in real estate assets, real estate companies and real estate debt and equity security investments.	PROCESSED PROCESSED
Type of Business Organization    corporation   limited partnership, already formed   other (please   limited partnership, to be formed	PROCESSED  JUL 0 72008  THOMSON REUTERS
Actual or Estimated Date of Incorporation or Organization:    Month Year	Actual Estimated for State:
GENERAL INSTRUCTIONS	
Federal:  Who Must File: All issuers making an offering of securities in reliance on an exemption under et seq. or 15 U.S.C. 77d(6).  When to File: A notice must be filed no later than 15 days after the first sale of securities in	FR 230.501

U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the at that address after the date on which it is due, on the date it was mailed by United States regi.

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)

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л, if received SS.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) E2M General Partner II, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 3401 Armstrong Avenue, Dallas, TX 75205 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) E2M Partners, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 3401 Armstrong Avenue, Dallas, TX 75205 ☐ Beneficial Owner ☐ Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Meyerson, Morton Business or Residence Address (Number and Street, City, State, Zip Code) 3401 Armstrong Avenue, Dallas, TX 75205 Director Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Rowsey, Paul Business or Residence Address (Number and Street, City, State, Zip Code) 3401 Armstrong Avenue, Dallas, TX 75205 Check Box(es) that Apply: Promoter Director Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Miller, C. Todd Business or Residence Address (Number and Street, City, State, Zip Code) 3401 Armstrong Avenue, Dallas, TX 75205 Director Check Box(es) that Apply: Promoter Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Jacobs, David Business or Residence Address (Number and Street, City, State, Zip Code) 3401 Armstrong Avenue, Dallas, TX 75205 Check Box(es) that Apply: Promoter Director Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Slaven, Richard Business or Residence Address (Number and Street, City, State, Zip Code) 3401 Armstrong Avenue, Dallas, TX 75205 Executive Officer Director Check Box(es) that Apply: Promoter Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Daves, Bill Business or Residence Address (Number and Street, City, State, Zip Code)

• Principal of the Issuer (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

3401 Armstrong Avenue, Dallas, TX 75205

	E		A. BASIC IDEN	TIFICATION DATA	語為摩尔場將	le varya marki i deli diningan a sasimarki. La angan kalamin angan sasimaran
2. Ente	r the information re					
•		•		within the past five years;		
•	Each beneficial ow securities of the iss		wer to vote or dispose, or	r direct the vote or disposi	tion of, 10% or me	ore of a class of equity
•	Each executive off	ficer and director o	of corporate issuers and o	f corporate general and ma	anaging partners o	f partnership issuers; and
•	Each general and r	nanaging partner o	of partnership issuers.			
Check 1	Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
	me (Last name first, ly, Steve	if individual)				
		ress (Number and	Street, City, State, Zip C	ode)		
	rmstrong Avenue, D	•				
Check I	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
	me (Last name first, irk, Mark	if individual)				
	ss or Residence Add rmstrong Avenue, D	•	Street, City, State, Zip C	ode)	•	
	Box(es) that Apply:		☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Na	me (Last name first,	if individual)				<del></del>
Busines	ss or Residence Add	ress (Number and	Street, City, State, Zip C	ode)		
Check 1	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Na	me (Last name first,	if individual)				
Busines	ss or Residence Add	ress (Number and	Street, City, State, Zip C	ode)		
Check I	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Na	me (Last name first,	if individual)				
Busines	ss or Residence Add	ress (Number and	Street, City, State, Zip C	ode)		·
Check I	Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Na	me (Last name first,	if individual)				
Busines	s or Residence Add	ress (Number and	Street, City, State, Zip C	ode)	·	
Check 1	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	me (Last name first,	if individual)				
Busines	ss or Residence Add	ress (Number and	Street, City, State, Zip C	ode)		
Principal	of the issuer	(I lse blan	k sheet or conv and use	additional copies of this sh	neet as necessary	

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******									_					Yes	No
1.	Has the iss	uer sold,	or does t											∐	$\boxtimes$
2.	Answer also in Appendix, Column 2, if filing under ULOE  What is the minimum investment that will be accepted from any individual?								\$5,00	1 000*					
۷.	* Subject to discretion of General Partner to accept a lesser amount.								. 4 <u>5,00</u>	<u> </u>					
_		<b></b> ,												Yes	No
3. 1			-		-	-							lirectly, any		
4.	commissio	n or sim	ilar remu	neration	for solici	tation of	purchase	ers in cor	nection	with sale	s of secu	rities in t	the offering. with a state		
	or states, li	st the na	me of the	e broker o	r dealer.	If more	than five	e (5) pers	ons to be				ns of such a		
Full	broker or d		-		ıntorma	ition for i	that broke	er or deal	er only.			=			
	iterbach, T		1154, 11 1110	iividuai)											
	iness or Res Galleria T										<del></del>				
	ne of Assoc P Securities		oker or D	ealer											<del></del>
Stat	es in Which	Person	Listed Ha	as Solicite	d or Inte	nds to Se	olicit Pur	chasers					<del>-,</del>	· · ·	<del></del>
	(Check "A	ll States"	or check	individu	al States)	)	•••••		•••••				***************************************	🛛 🖊	All States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DΩ	FL	GA	HI	ID		
	II	IN	IA NV	KS	KY	LA NM	ME	MD NC	MA ND	MI	MN	MS OR	МО		
	MT RT	SC	SD	NH TN	UЛ ХТ	UT	NY VT	VA	MA AW	OH WV	OK WI	WY WY	PR		
Full	Name (Las	t name f	<u> </u>			<u> </u>	ردیا			لنبتنا	لكنا		<u> </u>		
	·			·											
Bus	iness or Re	sidence A	Address (	Number a	nd Street	t, City, S	tate, Zip	Code)							
Nan	ne of Assoc	iated Bro	ker or D	ealer											
Stat	es in Which	Person	Listed Ha	as Solicite	d or Inte	nds to So	olicit Pur	chasers							
	(Check "A	ll States"	or check	individu	al States)	)	•••••	•••••		••••••	•••••	·	••••••	🔲 🖊	All States
	AL	ĀK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID		
	IL	IN	IΑ	KS	KY	LΑ	ME	MD	MA	ΜI	MN	MS	MO		
	TM TG	NE SC	NV SD	NH	TX	NM UT	NY	NC VA	ND WA	OH WV	OK WT	OR WY	PA		
Full	Name (Las	t name f	البيا			<u> </u>	<u> </u>						114		
Bus	iness or Res	idence A	Address (	Number a	nd Street	t, City, S	tate, Zip	Code)						·	· · · · · · · · · · · · · · · · · · ·
Nan	ne of Assoc	iated Bro	oker or D	ealer											
Stat	es in Which														
	(Check "A	I States"	or check	individu	al States)	)			_	·····				🔲 🗸	All States
٠	<u>AI</u>	AK	ΑZ	AR	CA	CO	CI	DE	<u> </u>	FI	GΑ	HI	ID		
	MT	NE NE	IA NV	KS NH	NJ NJ	I.A MM	ME	MD NC	MA ND	OH MI	MN OK	MS OR	MO		
	RI	SC	SD	TN	TX	<u> </u>	V	VA	WA	WV	WI	WY	PR		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total a already sold. Enter "0" if answer is "none" or "zero." If the transaction is an excoffering, check this box  and indicate in the columns below the amounts of the secoffered for exchange and already exchanged.	han	ge		
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	0	\$	0
	Equity	\$	0		0
	☐ Common ☐ Preferred	•			
	<del>-</del>	c	0	c	0
	Convertible Securities (including warrants)		100,000,000		6,000,000
	Partnership Interests	. p	0	- °	0
	Other (Specify)	. ♪.	100,000,000		6,000,000
	Total  Answer also in Appendix, Column 3, if filing und		•	— <b>•</b>	0,000,000
2.	Enter the number of accredited and non-accredited investors who have purchased sec in this offering and the aggregate dollar amounts of their purchases. For offerings Rule 504, indicate the number of persons who have purchased securities and the agg dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "ze	und rega	ег		Aggregate
			Number of		Dollar Amount
			Investors		of Purchases
	Accredited Investors		1	\$	6,000,000
	Non-accredited Investors		0	_ š	
	Total (for filings under Rule 504 only)			_ `s	
	Answer also in Appendix, Column 4, if filing und		II OE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested securities sold by the issuer, to date, in offerings of the types indicated, in the twelve months prior to the first sale of securities in this offering. Classify securities by type li Part C - Question 1.  Type of Offering  Rule 505  Regulation A	e (1	2)	_	Dollar Amount Sold
	Rule 504	•		— š	
	Total	•		- š	
<b>1</b> .	a. Furnish a statement of all expenses in connection with the issuance and distribution securities in this offering. Exclude amounts relating solely to organization expenses issuer. The information may be given as subject to further contingencies. If the amount expenditure is not known, furnish an estimate and check the box to the left estimate.	of to	ne of	¢	
	Printing and Engraving Costs	•		D D	15,000
	Laral Fees	-	×	Ф С	25,000
	Accounting Rees	•		D	23,000
	Fingineering Rees	•	H	Ф Ф	
	Sales Commissions (specify finders' fees senarately)	•		D	500,000
	Sales Commissions (specify finders' fees separately) Other Expenses (identify) Blue Sky filing fees, travel,	•		Φ	200,000
	consulting fees, office costs		$\boxtimes$	2	25,000
	winding 1000, VIIIO 0000				
	Total	•	$\boxtimes$	2	565,000

L	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	NSES AND	USE OF PROC	EEDS
	b. Enter the difference between the aggregate offering price given in response to Question 1 and total expenses furnished in response to Part C — Question difference is the "adjusted gross proceeds to the issuer."			\$ 99,435,000
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proused for each of the purposes shown. If the amount for any purpose is not known estimate and check the box to the left of the estimate. The total of the payments equal the adjusted gross proceeds to the issuer set forth in responses to Part C – 4.b above.	n, furnish an listed must		
			ents to Officers, tors & Affiliates	Payments to Others
	Salaries and fees (management fees)	<b>⊠</b> \$	1,650,000	_ 🗆 \$
	Purchase of real estate	<b>□</b> \$		_ 🗆 \$
	Purchase, rental or leasing and installation of machinery and equipment	[ \$		_ 🗆 \$
	Construction or leasing of plant buildings and facilities	<b>□</b> s		_ 🗆 \$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)			s
	Repayment of indebtedness		-	
	Working capital			□
	Other (specify): equity investments			\$ 94,785,000
	Column Totals	— ⊠ \$	1,650,000	
	Total Payments Listed (column totals added)		⊠ \$ 99	435 000

# D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)

E2M Value Added Fund II (Fund C), LP

Name of Signer (Print or Type)

Mark D. Van Kirk

Signature

Date

June 24, 2008

Title of Signer (Print or Type)

Vice President of E2M Partners, LLC, the manager of E2M General Partner II, LLC, the

General Partner of the Issuer

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

